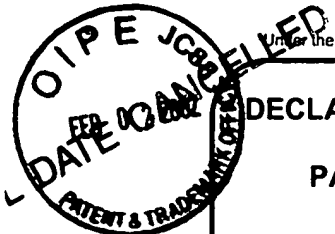




COPY OF PAPERS
ORIGINALLY FILED

43



Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Project of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted With Initial Filing
OR
 Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	10005.000120
First Named Inventor	Jax B. Cowden
COMPLETE IF KNOWN	
Application Number	09/993,906
Filing Date	November 27, 2001
Group Art Unit	2152
Examiner Name	not yet known

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR DISTRIBUTING A COMPUTER PROGRAM

the specification of which (Title of the Invention)

is attached hereto
OR

was filed on (MM/DD/YYYY) **11/27/2001** as United States Application Number or PCT International

Application Number **09/993,906** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Country	Priority Not Claimed	Certified Copy Attached?	
					YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

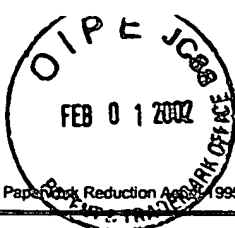
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label					OR		<input checked="" type="checkbox"/> Correspondence address below
Patrick D. Benedicto, Reg. No. 40,909							
Name deGuzman Okamoto & Benedicto LLP							
P.O. Box 51900							
Address							
Palo Alto			California		94303		
City			State		ZIP		
U.S.A.			650-691-2030		650-691-2032		
Country			Telephone		Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Jax B.				Family Name or Surname Cowden			
Inventor's Signature						Date	
Dallas			TX	US		US	
Residence: City			State	Country		Citizenship	
6242 Del Norte							
Mailing Address							
Dallas			TX	75205		US	
City			State	Zip		Country	
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Kevin V.				Family Name or Surname Dahlstrom			
Inventor's Signature <i>[Signature]</i>						Date 12/14/02	
Plano			TX	US		US	
Residence: City			State	Country		Citizenship	
9101 Elissa Court							
Mailing Address							
Plano			TX	95025		US	
City			State	Zip		Country	
<input checked="" type="checkbox"/> Additional Inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

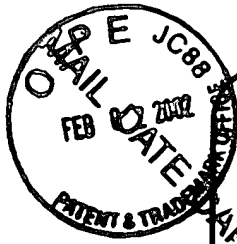


COPY OF PATENTS
ORIGINALLY FILED

PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Project of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.



DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted With Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	10005.000120
First Named Inventor	Jax B. Cowden
COMPLETE IF KNOWN	
Application Number	09/993,906
Filing Date	November 27, 2001
Group Art Unit	2152
Examiner Name	not yet known

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR DISTRIBUTING A COMPUTER PROGRAM

the specification of which *(Title of the Invention)*

is attached hereto

OR

was filed on (MM/DD/YYYY) 11/27/2001 as United States Application Number or PCT International

Application Number 09/993,906 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

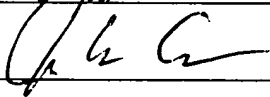
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

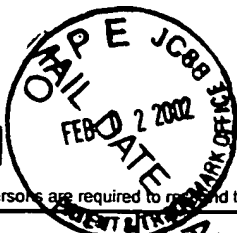
Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label OR <input checked="" type="checkbox"/> Correspondence address below			
Patrick D. Benedicto, Reg. No. 40,909			
Name deGuzman Okamoto & Benedicto LLP			
P.O. Box 51900			
Address			
Palo Alto	California	94303	
City	State	ZIP	
U.S.A.	650-691-2030	650-691-2032	
Country	Telephone	Fax	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Jax B.		Family Name or Surname Cowden	
Inventor's Signature 		Date 12-31-01	
Dallas	TX	US	US
Residence: City	State	Country	Citizenship
6242 Del Norte			
Mailing Address			
Dallas	TX	75205	US
City	State	Zip	Country
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Kevin V.		Family Name or Surname Dahlstrom	
Inventor's Signature		Date	
Plano	TX	US	US
Residence: City	State	Country	Citizenship
9101 Elissa Court			
Mailing Address			
Plano	TX	95025	US
City	State	Zip	Country
<input checked="" type="checkbox"/> Additional Inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

Docket No.: 10005.000120



OFFICE PAPERS
FILED

PTO/SB/02A (11-00)

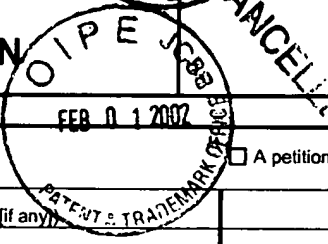
Please type a plus sign (+) inside this box →

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 3
--------------------	--



Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Scott G.			Eagle		
Inventor's Signature				Date	
Residence: City	Menlo Park	State	CA	Country	U.S.
Mailing Address				914 Continental Drive	
Mailing Address					
City	Menlo Park	State	CA	Zip	94025
Country				U.S.	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Charles			Gilbert		
Inventor's Signature				Date	
Residence: City	Sunnyvale	State	CA	Country	US
Mailing Address				744 Santa Paula Avenue	
Mailing Address					
City	Sunnyvale	State	CA	Zip	94085
Country				US	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Philip D.			Hollrah		
Inventor's Signature				Date	
Residence: City	San Francisco	State	CA	Country	CA
Citizenship				US	
Mailing Address				200 Presidio Avenue	
Mailing Address					
City	San Francisco	State	CA	Zip	94115
Country				US	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

+

COPIES OF PAPERS
ORIGINALLY FILED

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it contains a valid OMB control number.

O I P E J C B
FEB 0 1 2002
U.S. PATENT & TRADEMARK OFFICE

O I P E J C B
FEB 0 2 2002
U.S. PATENT & TRADEMARK OFFICE

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 3

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
Anthony G.			Martin		
Inventor's Signature				Date	
Residence: City	Los Altos	State	CA	Country	U.S.
Citizenship		Canada			
Mailing Address 1060 Los Altos Avenue					
Mailing Address					
City	Los Altos	State	CA	Zip	94022
Country		U.S.			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
Jeffrey A.			McFadden		
Inventor's Signature				Date	
Residence: City	Hillsborough	State	CA	Country	US
Citizenship		US			
Mailing Address 1220 Southdown Road					
Mailing Address					
City	Hillsborough	State	CA	Zip	94010
Country		US			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
Mark E.			Pennell		
Inventor's Signature				Date	
Residence: City	Austin	State	TX	Country	US
Citizenship		US			
Mailing Address 9428 Altona Way					
Mailing Address					
City	Austin	State	TX	Zip	78717
Country		US			

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it contains a valid OMB control number.

GOVERNMENT PAPERS
ORIGINALLY FILED

U.S. PATENT & TRADEMARK OFFICE
FEB 01 2002
P E JIC88
MAIL DATE CANCELLED

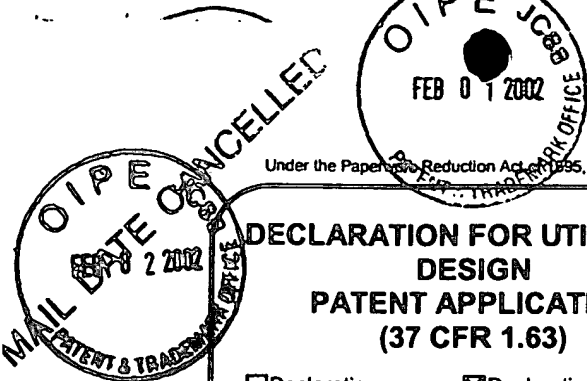
U.S. PATENT & TRADEMARK OFFICE
FEB 01 2002
P E JIC88

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Marc E.		Silverberg	
Inventor's Signature		Date	
Residence: City	Oakland	State	CA
		Country	U.S.
Citizenship US			
Mailing Address 3855 Forest Hill Avenue			
Mailing Address			
City	Oakland	State	CA
		Zip	94602
		Country	U.S.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



COPY OF PAPERS
ORIGINALLY FILED

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted With Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	10005.000120
	First Named Inventor	Jax B. Cowden
	COMPLETE IF KNOWN	
	Application Number	09/993,906
	Filing Date	November 27, 2001
	Group Art Unit	2152
Examiner Name	not yet known	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR DISTRIBUTING A COMPUTER PROGRAM

the specification of which (Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY) 11/27/2001 as United States Application Number or PCT International Application Number 09/993,906 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

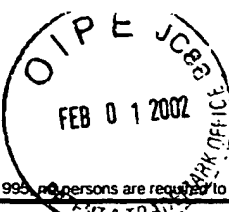
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



COPY OF PAPERS
ORIGINALLY FILED

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondance address below

Patrick D. Benedicto, Reg. No. 40,909
Name **deGuzman Okamoto & Benedicto LLP**

P.O. Box 51900
Address

Palo Alto City	California State	94303 ZIP
-------------------	---------------------	--------------

U.S.A. Country	650-691-2030 Telephone	650-691-2032 Fax
-------------------	---------------------------	---------------------

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Jax B.	Family Name or Surname	Cowden
---	--------	---------------------------	--------

Inventor's Signature	Date
-------------------------	------

Dallas Residence: City	TX State	US Country	US Citizenship
---------------------------	-------------	---------------	-------------------

6242 Del Norte
Mailing Address

Dallas City	TX State	75205 Zip	US Country
----------------	-------------	--------------	---------------

NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Kevin V.	Family Name or Surname	Dahlstrom
---	----------	---------------------------	-----------

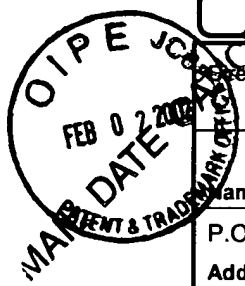
Inventor's Signature	Date
-------------------------	------

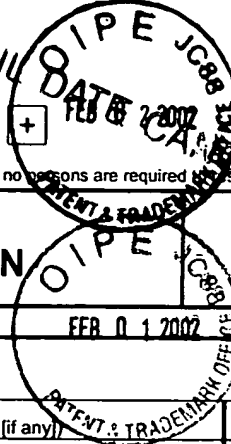
Plano Residence: City	TX State	US Country	US Citizenship
--------------------------	-------------	---------------	-------------------

9101 Elissa Court
Mailing Address

Plano City	TX State	95025 Zip	US Country
---------------	-------------	--------------	---------------

Additional Inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.





COPY OF FEES
ORIGINALLY FILED

Please type a plus sign (+) inside this box →

+

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

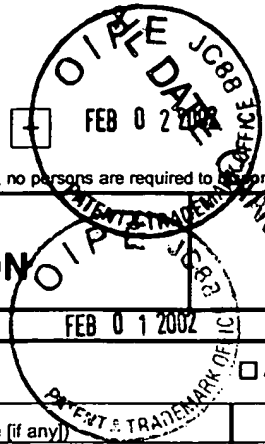
Under the Paperwork Reduction Act of 1995, no responses are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION **ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 1 of 3

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Scott G.				Eagle			
Inventor's Signature						Date	
Residence: City	Menlo Park	State	CA	Country	U.S.	Citizenship U.S.	
Mailing Address 914 Continental Drive							
Mailing Address							
City	Menlo Park	State	CA	Zip	94025	Country U.S.	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Charles				Gilbert			
Inventor's Signature						Date	
Residence: City	Sunnyvale	State	CA	Country	US	Citizenship US	
Mailing Address 744 Santa Paula Avenue							
Mailing Address							
City	Sunnyvale	State	CA	Zip	94085	Country US	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Philip D.				Hollrah			
Inventor's Signature						Date	
Residence: City	San Francisco	State	CA	Country	CA	Citizenship US	
Mailing Address 200 Presidio Avenue							
Mailing Address							
City	San Francisco	State	CA	Zip	94115	Country US	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Docket No.: 10005.00012



COPY OF PAPERS ORIGINALLY FILED

PTO/SB/02A (11-00)

Please type a plus sign (+) inside this box



Approved for use through 10/31/2002. OMB 0651-0032

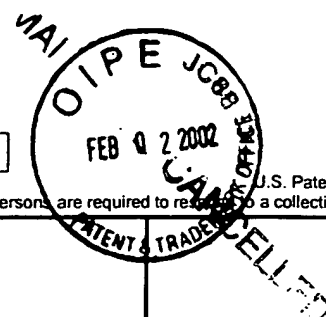
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION **ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 2 of 3

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Anthony G.				Martin			
Inventor's Signature				Date			
Residence: City	Los Altos	State	CA	Country	U.S.	Citizenship	Canada
Mailing Address 1060 Los Altos Avenue							
Mailing Address							
City	Los Altos	State	CA	Zip	94022	Country	U.S.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Jeffrey A.				McFadden			
Inventor's Signature				Date			
Residence: City	Hillsborough	State	CA	Country	US	Citizenship	US
Mailing Address 1220 Southdown Road							
Mailing Address							
City	Hillsborough	State	CA	Zip	94010	Country	US
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Mark E.				Pennell			
Inventor's Signature				Date			
Residence: City	Austin	State	TX	Country	US	Citizenship	US
Mailing Address 9428 Altona Way							
Mailing Address							
City	Austin	State	TX	Zip	78717	Country	US

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



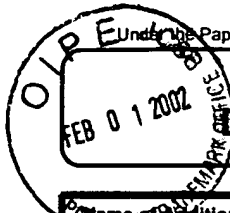
COPY OF PAPERS
ORIGINALLY FILED PTO/SB/02A (11-00)

Please type a plus sign (+) inside this box →

+

Approved for use through 10/31/2002. OMB 0651-0032

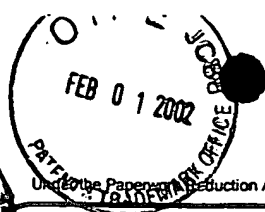
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.



DECLARATION **ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Marc E.		Silverberg	
Inventor's Signature		Date	
Residence: City	Oakland	State	CA
		Country	U.S.
Citizenship		US	
Mailing Address 3855 Forest Hill Avenue			
Mailing Address			
City	Oakland	State	CA
		Zip	94602
		Country	U.S.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



COPIES OF PAPERS
ORIGINALLY FILED

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted With Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	10005.000120
First Named Inventor	Jax B. Cowden
COMPLETE IF KNOWN	
Application Number	09/993,906
Filing Date	November 27, 2001
Group Art Unit	2152
Examiner Name	not yet known

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR DISTRIBUTING A COMPUTER PROGRAM

the specification of which (Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY) 11/27/2001 as United States Application Number or PCT International

Application Number 09/993,906 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

COPIES OF PAPERS
ORIGINALLY FILED

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

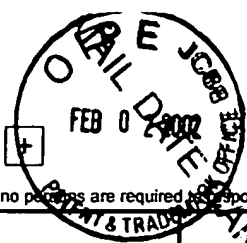
DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label OR <input checked="" type="checkbox"/> Correspondence address below			
Patrick D. Benedicto, Reg. No. 40,909			
Name deGuzman Okamoto & Benedicto LLP			
P.O. Box 51900			
Address			
Palo Alto	California	94303	
City	State	ZIP	
U.S.A.	650-691-2030	650-691-2032	
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Jax B. (first and middle [if any])		Family Name Cowden or Surname	
Inventor's Signature		Date	
Dallas	TX	US	US
Residence: City	State	Country	Citizenship
6242 Del Norte			
Mailing Address			
Dallas	TX	75205	US
City	State	Zip	Country
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Kevin V. (first and middle [if any])		Family Name Dahlstrom or Surname	
Inventor's Signature		Date	
Plano	TX	US	US
Residence: City	State	Country	Citizenship
9101 Elissa Court			
Mailing Address			
Plano	TX	95025	US
City	State	Zip	Country
<input checked="" type="checkbox"/> Additional Inventors are being named on the <u>3</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

Docket No.: 10005.0001

Please type a plus sign (+) inside this box →

+



COPY OF PAPERS
ORIGINALLY FILED

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

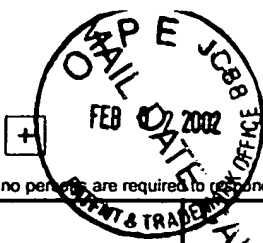
ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))			Family Name or Surname		
Scott G.			Eagle		
Inventor's Signature				Date	
Residence: City	Menlo Park	State	CA	Country	U.S.
Citizenship		U.S.			
Mailing Address 914 Continental Drive					
Mailing Address					
City	Menlo Park	State	CA	Zip	94025
Country		U.S.			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))			Family Name or Surname		
Charles			Gilbert		
Inventor's Signature				Date	
Residence: City	Sunnyvale	State	CA	Country	US
Citizenship		US			
Mailing Address 744 Santa Paula Avenue					
Mailing Address					
City	Sunnyvale	State	CA	Zip	94085
Country		US			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))			Family Name or Surname		
Philip D.			Hollrah		
Inventor's Signature				Date	
Residence: City	San Francisco	State	CA	Country	CA
Citizenship		US			
Mailing Address 200 Presidio Avenue					
Mailing Address					
City	San Francisco	State	CA	Zip	94115
Country		US			

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Docket No.: 10005.00012

Please type a plus sign (+) inside this box →



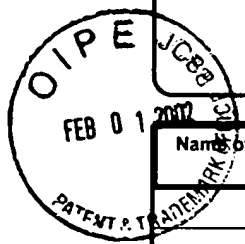
PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 3



Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Anthony G.				Martin			
Inventor's Signature				Date			
Residence: City	Los Altos	State	CA	Country	U.S.	Citizenship	Canada
Mailing Address 1060 Los Altos Avenue							
Mailing Address							
City	Los Altos	State	CA	Zip	94022	Country	U.S.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Jeffrey A.				McFadden			
Inventor's Signature				Date			
Residence: City	Hillsborough	State	CA	Country	US	Citizenship	US
Mailing Address 1220 Southdown Road							
Mailing Address							
City	Hillsborough	State	CA	Zip	94010	Country	US
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Mark E.				Pennell			
Inventor's Signature <i>Mark E Pennell</i>				Date <i>12-30-01</i>			
Residence: City	Austin	State	TX	Country	US	Citizenship	US
Mailing Address 9428 Altona Way							
Mailing Address							
City	Austin	State	TX	Zip	78717	Country	US

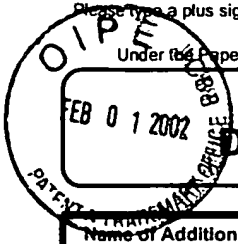
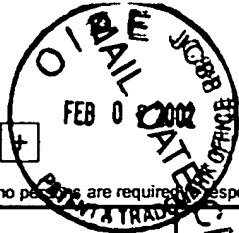
Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

+

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE



DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 3

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Marc E.	Silverberg

Inventor's Signature	Date
----------------------	------

Residence: City	Oakland	State	CA	Country	U.S.	Citizenship	US
-----------------	---------	-------	----	---------	------	-------------	----

Mailing Address 3855 Forest Hill Avenue

Mailing Address

City	Oakland	State	CA	Zip	94602	Country	U.S.
------	---------	-------	----	-----	-------	---------	------

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
--	------------------------

Inventor's Signature	Date
----------------------	------

Residence: City	State	Country	Citizenship
-----------------	-------	---------	-------------

Mailing Address

Mailing Address

City	State	Zip	Country
------	-------	-----	---------

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
--	------------------------

Inventor's Signature	Date
----------------------	------


Residence: City	State	Country	Citizenship
-----------------	-------	---------	-------------

Mailing Address

Mailing Address

City	State	Zip	Country
------	-------	-----	---------

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign, (+) inside this box 

COPY OF PAPERS
ORIGINALLY FILED

#4

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

LOIPE JCSCELLED
DATE 10/22/01
PATENT & TRADEMARK OFFICE

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

LOIPE JCSCELLED
FEB 01 2002
PATENT & TRADEMARK OFFICE

Application Number	09/993,906
Filing Date	November 27, 2001
First Named Inventor	Jax B. Cowden
Group Art Unit	2152
Examiner Name	not yet known
Attorney Docket Number	10005.000120

I hereby appoint:

Practitioners at Customer Number

Place Customer Number Bar Code Label here

Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

Practitioners at Customer Number

Place Customer Number Bar Code Label here

<input checked="" type="checkbox"/> Firm or Individual Name	DEGUZMAN OKAMOTO & BENEDICTO, LLP				
Address	P.O. Box 51900				
Address					
City	Palo Alto	State	CA	ZIP	94303
Country	U.S.A.				
Telephone	650-691-4761	Fax	650-691-2032		

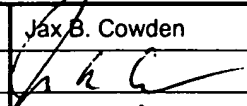
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Jax B. Cowden
Signature	
Date	12-31-01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 9 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this



COPY OF PAPERS
ORIGINALLY FILED

PTO/SB/81 (02-01)

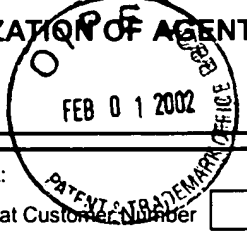
Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



POWER OF ATTORNEY OR AUTHORIZATION OF AGENT



Application Number	09/993,906
Filing Date	November 27, 2001
First Named Inventor	Jax B. Cowden
Group Art Unit	2152
Examiner Name	not yet known
Attorney Docket Number	10005.000120

I hereby appoint:

Practitioners at Customer Number [] OR



Place Customer Number Bar Code Label here

Practitioner(s) named below:

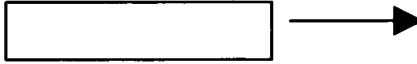
Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number. OR

Practitioners at Customer Number [] OR



Place Customer Number Bar Code Label here

<input checked="" type="checkbox"/> Firm or Individual Name	DEGUZMAN OKAMOTO & BENEDICTO, LLP				
Address	P.O. Box 51900				
Address					
City	Palo Alto	State	CA	ZIP	94303
Country	U.S.A.				
Telephone	650-691-4761	Fax	650-691-2032		

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

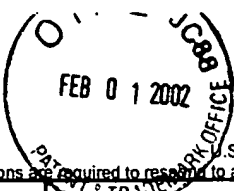
Name	Kevin V. Dahlstrom
Signature	<i>Kevin V. Dahlstrom</i>
Date	12/26/2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 9 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this



COPY COPY PAPERS ORIGINAL FILED

PTO/SB/81 (02-01)

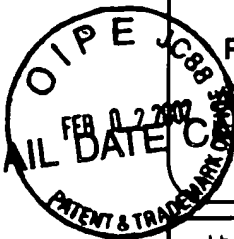
Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/993,906
Filing Date	November 27, 2001
First Named Inventor	Jax B. Cowden
Group Art Unit	2152
Examiner Name	not yet known
Attorney Docket Number	10005.000120



I hereby appoint:

Practitioners at Customer Number

Place Customer Number Bar Code Label here

Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

Practitioners at Customer Number

Place Customer Number Bar Code Label here

Firm or Individual Name: DEGUZMAN OKAMOTO & BENEDICTO, LLP

Address: P.O. Box 51900

Address:

City: Palo Alto, State: CA, ZIP: 94303

Country: U.S.A.

Telephone: 650-691-4761, Fax: 650-691-2032

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name: Scott G. Eagle

Signature: *[Handwritten Signature]*

Date: 12-17-01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 9 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this →

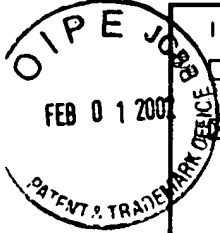
COPY OF PAPERS
ORIGINALLY FILED

PTO/SB/81 (02-01)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	
Application Number	09/993,906
Filing Date	November 27, 2001
First Named Inventor	Jax B. Cowden
Group Art Unit	2152
Examiner Name	not yet known
Attorney Docket Number	10005.000120



I hereby appoint:

Practitioners at Customer Number → Place Customer Number Bar Code Label here

OR

Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

Practitioners at Customer Number → Place Customer Number Bar Code Label here

<input checked="" type="checkbox"/> Firm or Individual Name	DEGUZMAN OKAMOTO & BENEDICTO, LLP				
Address	P.O. Box 51900				
Address					
City	Palo Alto	State	CA	ZIP	94303
Country	U.S.A.				
Telephone	650-691-4761	Fax	650-691-2032		

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

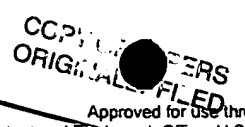
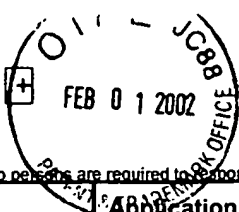
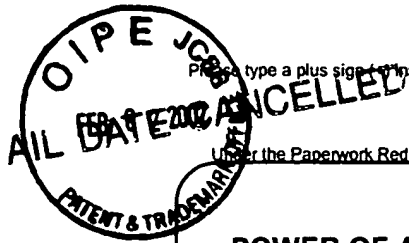
SIGNATURE of Applicant or Assignee of Record

Name	Charles Gilbert
Signature	
Date	12-17-01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 9 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/993,906
Filing Date	November 27, 2001
First Named Inventor	Jax B. Cowden
Group Art Unit	2152
Examiner Name	not yet known
Attorney Docket Number	10005.000120

I hereby appoint:

Practitioners at Customer Number

Place Customer Number Bar Code Label here

Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.
OR
 Practitioners at Customer Number

Place Customer Number Bar Code Label here

<input checked="" type="checkbox"/> Firm or Individual Name	DEGUZMAN OKAMOTO & BENEDICTO, LLP				
Address	P.O. Box 51900				
Address					
City	Palo Alto	State	CA	ZIP	94303
Country	U.S.A.				
Telephone	650-691-4761	Fax	650-691-2032		

I am the:

Applicant/Inventor.
 Assignee of record of the entire interest. See 37 CFR 3.71.
Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).


SIGNATURE of Applicant or Assignee of Record

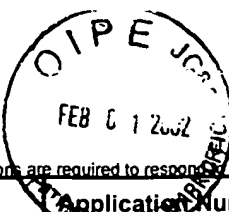
Name	Philip D. Hollrah
Signature	<i>Philip D. Hollrah</i>
Date	12-18-01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 9 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this 

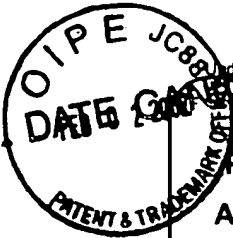


COPIES OF PAPERS ORIGINAL FILED

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/993,906
Filing Date	November 27, 2001
First Named Inventor	Jax B. Cowden
Group Art Unit	2152
Examiner Name	not yet known
Attorney Docket Number	10005.000120

I hereby appoint:

Practitioners at Customer Number

Place Customer Number Bar Code Label here

Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

Practitioners at Customer Number

Place Customer Number Bar Code Label here

<input checked="" type="checkbox"/> Firm or Individual Name	DEGUZMAN OKAMOTO & BENEDICTO, LLP				
Address	P.O. Box 51900				
Address					
City	Palo Alto	State	CA	ZIP	94303
Country	U.S.A.				
Telephone	650-691-4761	Fax	650-691-2032		

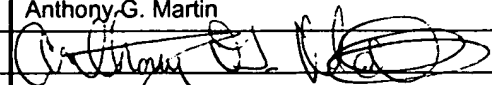
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).


SIGNATURE of Applicant or Assignee of Record

Name	Anthony G. Martin
Signature	
Date	12, 18, 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 9 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this 

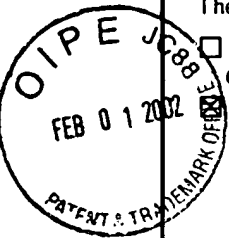
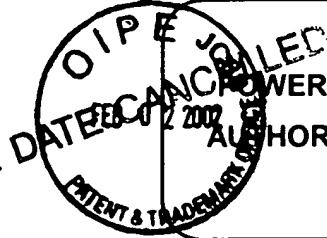
COPY OF PAPERS
ORIGINALLY FILED

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	09/993,906
Filing Date	November 27, 2001
First Named Inventor	Jax B. Cowden
Group Art Unit	2152
Examiner Name	not yet known
Attorney Docket Number	10005.000120

I hereby appoint:

Practitioners at Customer Number

Place Customer
Number Bar Code
Label here

OR

Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

Practitioners at Customer Number

Place Customer
Number Bar Code
Label here

Firm or
Individual Name

DEGUZMAN OKAMOTO & BENEDICTO, LLP

Address P.O. Box 51900

Address

City Palo Alto State CA ZIP 94303

Country U.S.A.

Telephone 650-691-4761 Fax 650-691-2032

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name Jeffrey A. McFadden

Signature 

Date Dec. 18, 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 9 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this

COPY OF PAPERS
ORIGINALLY FILED

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/993,906
Filing Date	November 27, 2001
First Named Inventor	Jax B. Cowden
Group Art Unit	2152
Examiner Name	not yet known
Attorney Docket Number	10005.000120

I hereby appoint:

Practitioners at Customer Number

Place Customer
Number Bar Code
Label here

Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

Practitioners at Customer Number

Place Customer
Number Bar Code
Label here

Firm or Individual Name
DEGUZMAN OKAMOTO & BENEDICTO, LLP

Address
P.O. Box 51900

Address

City
Palo Alto State CA ZIP 94303

Country
U.S.A.

Telephone
650-691-4761 Fax 650-691-2032

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name
Mark E. Pennell

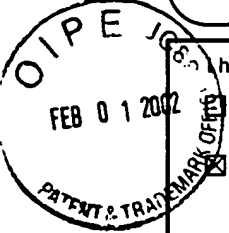
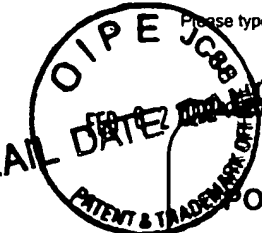
Signature
Mark E Pennell

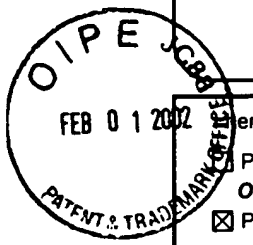
Date
12-30-01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 9 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.





COPY OF PAPERS
ORIGINALLY FILED

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/993,906
Filing Date	November 27, 2001
First Named Inventor	Jax B. Cowden
Group Art Unit	2152
Examiner Name	not yet known
Attorney Docket Number	10005.000120

I hereby appoint:

Practitioners at Customer Number

Place Customer
Number Bar Code
Label here

Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

Practitioners at Customer Number

Place Customer
Number Bar Code
Label here

<input checked="" type="checkbox"/> Firm or Individual Name	DEGUZMAN OKAMOTO & BENEDICTO, LLP				
Address	P.O. Box 51900				
Address					
City	Palo Alto	State	CA	ZIP	94303
Country	U.S.A.				
Telephone	650-691-4761	Fax	650-691-2032		

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Marc E. Silverberg
Signature	
Date	12-17-01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 9 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

MAILED
DATE
FEB 01 2002
U.S. PATENT & TRADEMARK OFFICE

COPIES OF PAPERS
ORIGINALLY FILED

Approved for use through 10/31/2002. OMB 0651-0032

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

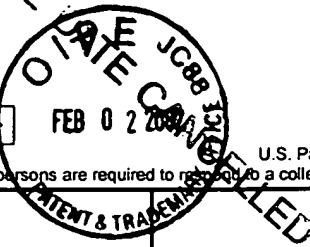
OIP E
FEB 01 2002
U.S. PATENT & TRADEMARK OFFICE

DECLARATION **ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 1 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Scott G.		Eagle	
Inventor's Signature <i>[Signature]</i>		Date 12-17-01	
Residence: City	Menlo Park	State	CA
Country	U.S.		Citizenship
Mailing Address 914 Continental Drive			
Mailing Address			
City	Menlo Park	State	CA
Zip	94025	Country U.S.	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Charles		Gilbert	
Inventor's Signature <i>[Signature]</i>		Date 12-17-01	
Residence: City	Sunnyvale	State	CA
Country	US		Citizenship
Mailing Address 744 Santa Paula Avenue			
Mailing Address			
City	Sunnyvale	State	CA
Zip	94085	Country US	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Philip D.		Hollrah	
Inventor's Signature <i>[Signature]</i>		Date 12-18-01	
Residence: City	San Francisco	State	CA
Country	CA		Citizenship
Mailing Address 200 Presidio Avenue			
Mailing Address			
City	San Francisco	State	CA
Zip	94115	Country US	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Docket No.: 10005.000120



COPIES OF PAPERS FULLY FILED

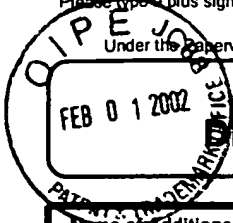
PTO/SB/02A (11-00)

Please type a plus sign (+) inside this box



Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.



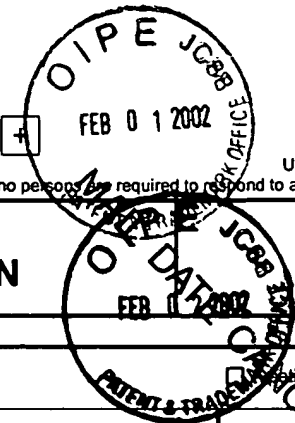
DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Anthony G.		Martin	
Inventor's Signature		Date 12/18/2001	
Residence: City	Los Altos	State	CA
Country	U.S.		Citizenship
Mailing Address			
1060 Los Altos Avenue			
Mailing Address			
City	Los Altos	State	CA
Zip	94022	Country	U.S.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jeffrey A.		McFadden	
Inventor's Signature		Date Dec 18, 01	
Residence: City	Hillsborough	State	CA
Country	US		Citizenship
Mailing Address			
1220 Southdown Road			
Mailing Address			
City	Hillsborough	State	CA
Zip	94010	Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Mark E.		Pennell	
Inventor's Signature		Date	
Residence: City	Austin	State	TX
Country	US		Citizenship
Mailing Address			
9428 Altona Way			
Mailing Address			
City	Austin	State	TX
Zip	78717	Country	US

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Docket No.: 10005.000120



ORIGINAL PAPERS
APPROVED FOR USE THROUGH 10/31/2002. OMB 0651-0032
U.S. PATENT AND TRADEMARK OFFICE, U.S. DEPARTMENT OF COMMERCE

PTO/SB/02A (11-00)

Please type a plus sign (+) inside this box →

+

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION **ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 3 of 3

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Marc E.			Silverberg		
Inventor's Signature <i>Marc E. Silverberg</i>				Date 12-17-01	
Residence: City	Oakland	State	CA	Country	U.S.
Mailing Address 3855 Forest Hill Avenue					
Mailing Address					
City	Oakland	State	CA	Zip	94602
Country U.S.					
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Inventor's Signature				Date	
Residence: City		State		Country	
Mailing Address					
Mailing Address					
City		State		Zip	
Country					
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Inventor's Signature				Date	
Residence: City		State		Country	
Mailing Address					
Mailing Address					
City		State		Zip	
Country					

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.